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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/599,010
Filing Date	September 18, 2006
First Named Inventor	Magali Bourghol Hickey
Title	Novel Pharmaceutical Forms, ...
Art Unit	
Examiner Name	
Attorney Docket Number	TPI-5053C3XC1T

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☒ Practitioners associated with the Customer Number:

23557

OR

☐ Practitioner(s) named below:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Magali B. Hickey</i>	Date	11/4/07
Name	MAGALI BOURGHOL HICKEY	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

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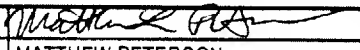
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Signature		Date	21- Dec - 2006
Name	MATTHEW PETERSON	Telephone	
Title and Company	Senior Scientist / Group leader; TransForm Pharmaceuticals		

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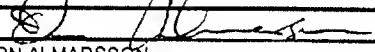
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Signature		Date	09 JAN 2007
Name	ORN ALMARSSON	Telephone	
Title and Company			

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☐

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Signature		Date	06/20/07
Name	MICHAEL J. ZAWOROTKO	Telephone	813 974 4129
Title and Company	Professor, University of South Florida		

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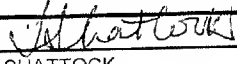
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Signature		Date	9/15/07
Name	TANISE SHATTOCK	Telephone	
Title and Company			

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Signature		Date	12-JAN-2007
Name	JULIUS REMENAR	Telephone	781-674-7927
Title and Company	Principal Investigator / Group Leader, Transform Pharmaceuticals		

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Signature	<i>Mark Tawa</i>	Date	11/5/07
Name	MARK TAWA	Telephone	
Title and Company			

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